Complete and send this form together

th applicable fee(s), to: Mail

Mail Stop IS Commission br Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885



or <u>Fax</u>

fild be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where m

maintenance fee notific CURRENT CORRESPON	DENCE ADDRESS (Note: Use Block I	for any change of address)		Note: A certificate o	f mailing can only be used t	for domestic mailings of the	
22850	7590 07/19/2005			Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
22630	7370 07/17/200.	,)	Certificate of Mailing or Transmission			
	CUSTOMER NUMBER			I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
	2285	60				(Depositor's name)	
09/26/2005 MBEYENE	00000054 09998210)	M_W.**		(Signature)	
01 FC:1501	1400.00 ()P				(Date)	
E FAPELLATION NO.	- 1 500,00 ()P 	FIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/998,210	-8001 30100 971		Yves Ambiehl		216693US2	4385	
	N: METHOD FOR THE SIZE	NG OF A DETERMI					
TITLE OF INVENTION	N. METHOD FOR THE SIZE	NG OF A DETERMIN	MBIIC III EIA	CRET-SWITCHING IN	CANDINIBBION NET WORK		
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	<u>.</u>	\$300	\$1700	10/19/2005	
•					7	10,11,200	
E	EXAMINER		IIT	CLASS-SUBCLASS	ل		
MATTIS, JASON E				370-516000			
1. Change of correspond CFR 1.363).	dence address or indication of	"Fee Address" (37		on the patent front page,	. 1001	ON, SPIVAK,	
Change of correspondence address (or Change of Correspondence			or agents OR alternatively				
Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 McCLELLAND, MAIER 2 & NEUSTADT, P.C.				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME	AND RESIDENCE DATA TO	BE PRINTED ON T	THE PATENT (priz	it or type)	 		
PLEASE NOTE: Un recordation as set for	nless an assignee is identified th in 37 CFR 3.11. Completion	below, no assignee on of this form is NO	data will appear or T a substitute for fil	n the patent. If an assig ling an assignment.	nee is identified below, the	document has been filed fo	
(A) NAME OF ASSIGNEE (B) RE				RESIDENCE: (CITY and STATE OR COUNTRY)			
THALES			Paris, FRANCE				
Please check the approp	riate assignee category or cate	egories (will not be pr	inted on the patent)	: 🗖 Individual 🛣 (Corporation or other private g	roup entity 🚨 Governmen	
4a. The following fee(s)	are enclosed:	46	. Payment of Fee(s	•			
Issue Fee			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).				
Advance Order -	# 01 Copies		Deposit Account 1	Number 15-0030	(enclose an extra	copy of this form).	
	atus (from status indicated ab	•					
1.1	ns SMALL ENTITY status. S				ALL ENTITY status. See 37 (14. 1 /	
NOTE: The Issue Fee as interest as shown by the	PTO is requested to apply the and Publication Fee (if required records of the United States I	l) will not be accepted attent and Trademark	d from anyone othe Office.	r than the applicant; a re	gistered attorney or agent; or	the assignee or other party in	
Authorized Signature	brech Scafer	tal.		Date	SEP 2 2		
Typed or printed name Joseph Scafetta, Jr.				Registratio	Pog No 26		
This H		1 211 The information			the public which is to file (a	H. J. FIGDTO	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.